

JC 2/55  
8/29  
ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	<i>PAT</i>	70385	
<b>O.I.P.E. CLASSIFIER</b>	<i>PH</i>		7/22
<b>FORMALITY REVIEW</b>	<i>N</i>	553	8-28-09
<b>RESPONSE FORMALITY REVIEW</b>	<i>H</i>	60165	11-27-09

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	7 12 11 24 2 12 21 2 12 01 02 02
1	✓
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23	
24	11
25	✓
26	N
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34	N
35	✓
36	✓
37	✓
38	N
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41	
42	N
43	✓
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46	
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48	
49	
50	✓

Claim	Date
Final	
Original	11 12 52
51	✓
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62	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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